PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

0630-1273P

CLAIMS AS FILED - PART ((Column 1)						(Column 2) TYPE			TITY	OR	OTHER SMALL E	
TOTAL CLAIMS			12				ſ	RATE	FEE] [RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	Ī	BASIC FEE	355.00	OR	BASIC FEE	710.00
TC	TAL CHARGEA	BLE CLAIMS	2 minus 20=		• 0			X\$ 9=		OR	X\$18=	
INE	DEPENDENT CL	AIMS	(minus 3 =		* 0		ľ	X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT							ŀ	+135=		OR	+270=	-
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	L	TOTAL		OR	TOTAL	710
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALLE	ENTITY	OR	OTHER SMALL	H H
AMENDMENT A		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 13	Minus	0	\bigcirc	=		X\$ 9=		OR	X\$18=	
	Independent	* \	Minus	***	S CLAIM	=		X40=		OR	X80=	
<u>L</u>	FIRST PRESE	NTATION OF M		ENDEN	CLAIM			+135=		OR	+270=	
							<u>L</u>	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	T CL AIM			X40=		OR	X80=	
<u></u>	THIST PRESE	NIATION OF W	OLIII EL OLI	LIVELIV	CLAIN			+135=		OR	+270=	
							ے م	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)	51					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=			X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM]	+135=		OR	-	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												